Opioids in Wyoming, Medication Assisted Treatment & Opioid Overdose Reversal

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Acknowledgements

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Meet





What is an opioid?



Natural

- Morphine
- Codeine



Semi-synthetic

- Heroin
- Oxycodone
- Hydrocodone



Fully synthetic

- Fentanyl
- Methadone
- Buprenorphine



Opioid Crisis

What do we know about the Opioid Crisis?

- ▶ 21 to 29% of patients prescribed opioids for chronic pain misuse them
- ▶ Between 8 and 12% develop an opioid use disorder
- ► An estimated 4 to 6% who misuse prescription opioids transition to heroin.
- About 80% of people who use heroin first misused prescription opioids.

The Story of Opioids in Wyoming

KEY FINDINGS by WYSAC Study, 2018 (Wyoming Statistical & Analysis Center, Univ. of Wyoming)

- Non-medical use of prescription pain medication in Wyoming is comparable to the national average -- US 4%, Wyoming 3% (self-reporting ages 12 and older).
- Past year nonmedical use of prescription pain medication in Wyoming is most common among young adults
 - > 7% -- Ages 18-25
 - ▶ 4% -- Ages 12-17
 - ▶ 3% -- Ages 26 and greater

Opioid Prescribing Rates

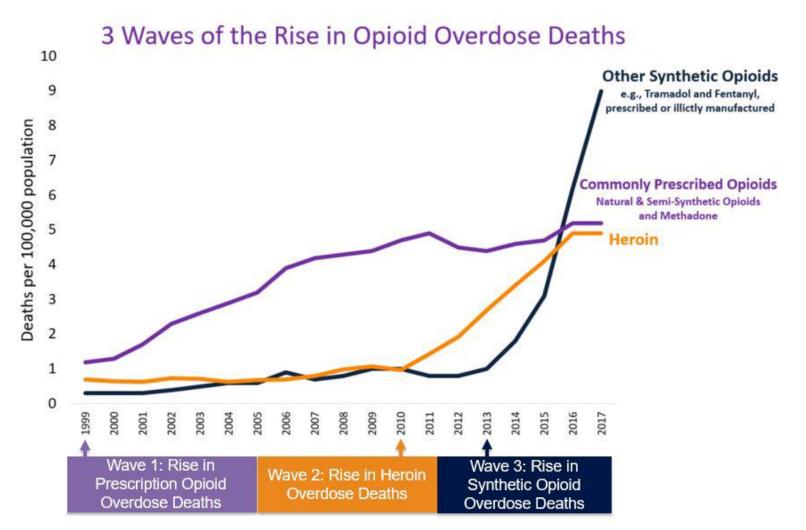
Wyoming's opioid prescribing rate is above the national average

- 2016- Retail opioid prescriptions dispensed per 1,000 persons
 - ►U.S 665
 - ► Wyoming 711

The Story of Opioids in Wyoming (continued) WYSAC Data

Wyoming has a stable rate of poisonings deaths due to opioids while the nation continues to increase.

The rate of poisoning deaths due to opioids in Wyoming and nationally have steadily been increasing over time, with a recent increase in the national rate.



Drug Overdose Deaths in the United States 2017 Overdose Deaths (any drug) 70,237

Deaths/1000 - 21.7

Any opioid 47,600

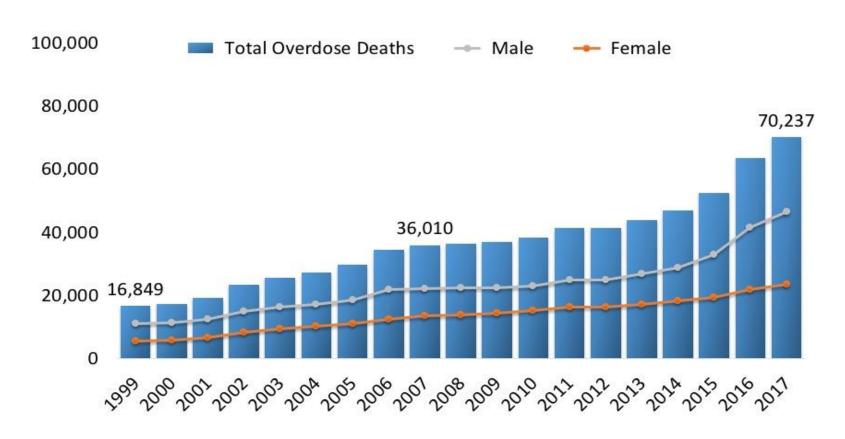
Deaths/1000 - 14.2

Heroin 15,482

Deaths/1000 - 4.9

Source - National Center for Health Statistics, National Vital Statistics, Mortality

Figure 1. **National Drug Overdose Deaths**Number Among All Ages, by Gender, 1999-2017



Drug overdose deaths - Wyoming

2017 - 69 overdose deaths(all substances)Deaths/1000 - 12.2

Prescribing Issues and Under Reporting

- ► New efforts PDMP Prescription Drug Monitoring Programs
- The Wyoming Board of Pharmacy established a Prescription Drug Monitoring Program in July 2004, (W.S. 35-7-1060). The Board collects Schedule II-V controlled substance prescription information from all resident and non-resident retail pharmacies that dispense to the residents of Wyoming.
 - Wyoming Legislative Changes, 2019
 - ► Expanding the requirement to report prescriptions

Defining Addiction Opioid Use Disorder - Diagnostic Criteria



- Opioids are taken in larger amounts or over a longer period than was intended
- Persistent desire or unsuccessful efforts to cut down or control use
- Extensive time and effort are spent in activities to obtain the drug, use it, and recover from the use.
- Craving or urge to use opioids.

Opioid Use Disorder

- Recurrent use resulting in failure to fulfill obligations at work, school or home.
- Important social, occupational, or recreational activities are reduced or given up because of use.
- Tolerance changes: need for markedly increased amounts to achieve intoxication or desired effect or diminished effect with use of the same amount of opioid.



WITHDRAWAL SYMPTOMS UNASSISTED WITHDRAWAL MAY NOT BE LIFE-THREATENING, BUT IT CAN BE HIGHLY UNCOMFORTABLE. PEOPLE MAY BE MORE VULNERABLE TO RELAPSE IF THEY DO NOT RECEIVE PROFESSIONAL MEDICAL TREATMENT TO HELP RELIEVE WITHDRAWAL SYMPTOMS.

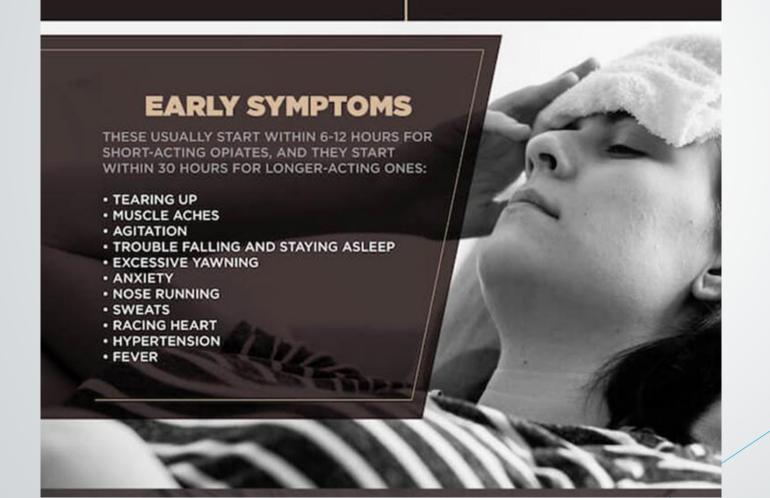
BETWEEN 26.4 MILLION AND 36 MILLION PEOPLE
AROUND THE GLOBE ABUSE OPIATE DRUGS,
WHICH INCLUDES PRESCRIPTION PAIN RELIEVERS
AND THE ILLEGAL DRUG HEROIN.



100 AMERICANS DIE OF A DRUG OVERDOSE EVERY DAY, AND 46 PEOPLE IN THE UNITED STATES DIE DAILY DUE TO PRESCRIPTION OPIOID OVERDOSE.

OPIOIDS ARE RESPONSIBLE FOR MORE DEATHS THAN ANY OTHER MEDICATION OR DRUG.

WITHDRAWAL SYMPTOMS







DETOX FOLLOWED WITH COUNSELING, EDUCATION, FAMILY AND INDIVIDUAL THERAPY, AND SUPPORT GROUPS CAN HELP AN INDIVIDUAL STOP USING DRUGS AND MAINTAIN SOBRIETY.

Introduction to Medication Assisted Treatment

Medication-Assisted Treatment (MAT) is the use of medications, in combination with counseling and behavioral therapies, to provide a "whole-patient" approach to the treatment of substance use disorders. Research shows that a combination of medication and therapy can successfully treat these disorders, and for some people struggling with addiction, MAT can help sustain recovery.

Medication Assisted Treatment

In combination with counseling/therapy/recovery support MAT can:

- Reduce illicit drug use
- Reduce morbidity/mortality
- Decrease overdose deaths
- Reduce transmission of infectious diseases
- ► Increase treatment retention
- Improve social functioning
- Reduce criminal activity

Barriers to Medication Assisted Treatment

Guilt and shame issues

Lack of access to appropriate treatment

Stigma

Cost of treatment

Assumption of need for highest level of care

Medications used in MAT

- ► Two Medicatations
 - Suboxone Buprenorphine and Naloxone
 - ► Vivitrol Buprenorphine and Naltrexone
 - Helps people reduce or quit heroin and other opiates use
 - Used as part of a comprehensive treatment plan that includes counseling and participation in social support programs.

Medications continued

Synthetic medication that acts as a partial agonist at opioid receptors - does not produce the euphoria and sedation caused by heroin and other opioids, reduces or eliminates withdrawal symptoms

► Has low risk of overdose

Available in tablet and film formulations

Side Effects of Medication

- ▶ Nausea, vomiting, and constipation
- Muscle aches and cramps
- Cravings
- ► Inability to sleep
- Distress and irritability
- Fever

Misuse Potential

- Can be misused by people who do not have an opioid dependency.
- Naloxone can be added to decrease the likelihood of diversion and misuse.

Medication Safety

- ✓ Do not take other medications without first consulting your doctor.
- ✓ Do not use illegal drugs, alcohol, sedatives, or drugs that slow breathing.
- ✓ Do ensure that a physician monitors and liver-related health issues.



How Much Does Opioid Treatment Cost

Suboxone

• Including medication and twice-weekly visits: \$1,176.00 per week or \$14,112.00

Diabetes = \$8,000/year

Cardio Vascular disease = \$15,000/year

Untreated OUD costs even more:

Criminal Justice

Babies born dependent on opioids

Increased transmission of infectious diseases



Injuries associated with intoxication

Lost productivity

Cost of Opioid Addiction

The estimated expense to society of opioid addiction nears \$20 billion annually, yet the cost of treating an individual addicted to opioids is only \$4,000 per year. If every opioiddependent person in the United States received treatment, \$16 billion would be saved every year.

National Drug Court Institute Practitioner Fact Sheet "Methadone Maintenance and Other Pharmacotherapeutic Interventions in the Treatment of Opioid Addiction." April 2002, Vol. III, No. 1

Opioid Overdose Prevention and Reversal



Basic Overdose Information

Overdose is a preventable cause of death in the majority of cases because it:

- Can happen to experienced as well as novice users.
- Happens over 1-2 hours, not instantly.
- Is witnessed by other users or others in the user's social network.
- Can be treated effectively with naloxone (Narcan).

Risk Factors for Overdose

- Loss of Tolerance: Regular use of opioids leads to tolerance more is needed to achieve the same effect (same high). Overdoses occur when people start to use again, following a period of abstinence such as incarceration, detox or "drug free" drug treatment.
- Mixing Drugs: Mixing opioids with other drugs, especially depressants such as benzodiazepines (Xanax, Clonopin) or alcohol. They are "synergistic"- the effect of taking mixed drugs is greater than the effect one would expect if taking the drugs separately or together. Cocaine is a stimulant but in high doses it can also depress the urge to breath.

More Risk Factors

- **Using alone:** When using drugs alone there is no one present to see signs of overdose. As noted above, users are at greater risk of overdosing if recently abstinent or mixing drugs and should try to avoid doing that when alone.
- Variation in strength of 'street' drugs Street drugs may vary in strength and effect based on the purity of the heroin (or other opioid) and the amount of other ingredients used to cut the drug. Users can use small amounts of new batches or inject slowly enough to get a feel of the quality.
- Serious illness including: AIDS, HCV liver disease, COPD, diabetes and heart disease.

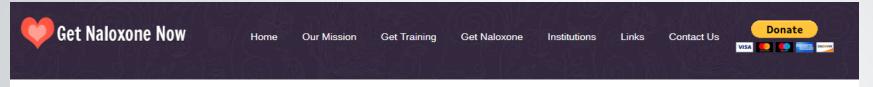
Key Vulnerable Groups

- People experiencing homelessness
- People experiencing incarceration
- People entering and exiting treatment of opioid use disorder (OUD)
- People living with HIV/AIDS

Opioid Overdose Reversal

- Naloxone (Narcan)
 - https://www.youtube.com/watch?v=dBF0ovVWPYc
 - ▶ Get Naloxone Now, web-based guidance on overdose reversal

Opioid Overdose Reversal

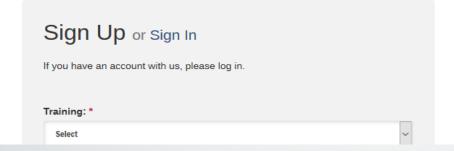


Use the Firefox or Internet Explorer browser so you can access your Certificate at the end of the training.

Please disable your popup blocker for this site because it will interfere with training functionality.

If you have already earned your certificate and need to download it, sign in here.

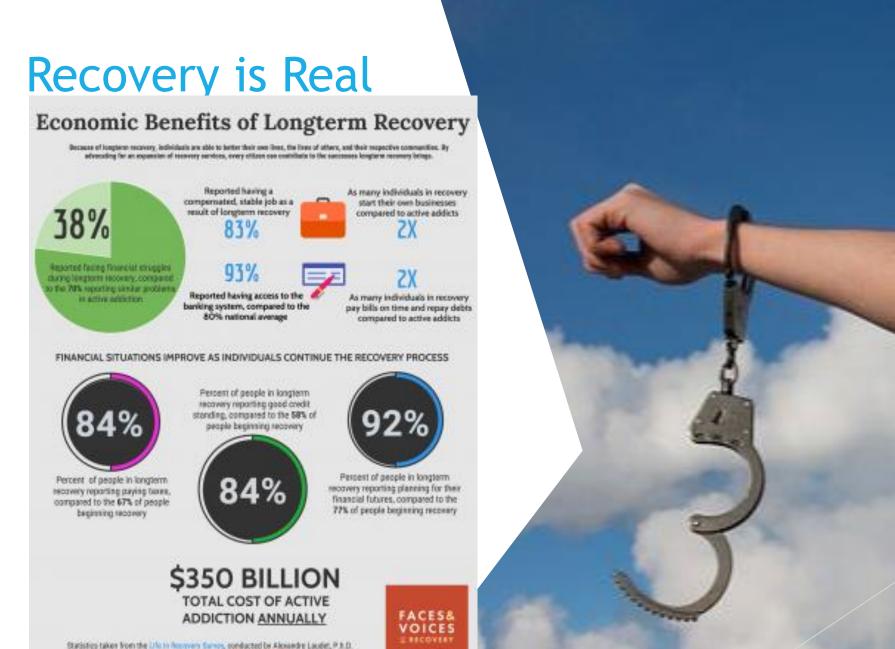
In order to make this life-saving project sustainable, we are asking for a donation of \$10 for Certificates of Completion. Once you successfully complete the post-test, you will be able to donate. Then, your Certificate will be emailed to you and you will be able to lo to your account to print the Certificate up to 3 months post-training. Your tax-deductible donation will support GetNaloxoneNow's mission to extend the reach of overdose recognition, prevention and response education with naloxone. As preventable deaths continue to reach epidemic proportions, our work is as urgent as ever. (Check you spam folder if you do not see a Certificate in you email.) Thank you for your support!.



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Recovery is Real





Recovery is Real

CREATING RECOVERY-READY COMMUNITIES

QUIDE TO RECOVERY SUPPORT SERVICES



ALTERNATIVE PEER GROUP (APG) - A community-based, family-centered, professionally staffed, positive peer support program that affers prosocial activities, counseling, and case-management for youth and young adults who struggle with substance use. The main focus is to offer and shape a new peer group that utilizes positive peer pressure to stay sober, in addition,



collegiate recovery community - A supportive environment within the compus culture that reinforces the decision to disengage from addictive behavior, it is designed to provide an educational opportunity alongside recovery support to ensure that students do not have to sacrifice one for the other.



JAIL & PRISON BASED RECOVERY SUPPORT - Individuals in recovery bring recovery groups, coaching and other activities into facilities to assist Incarcerated individuals in achieving and maintaining recovery and connecting with community-based recovery support upon release.



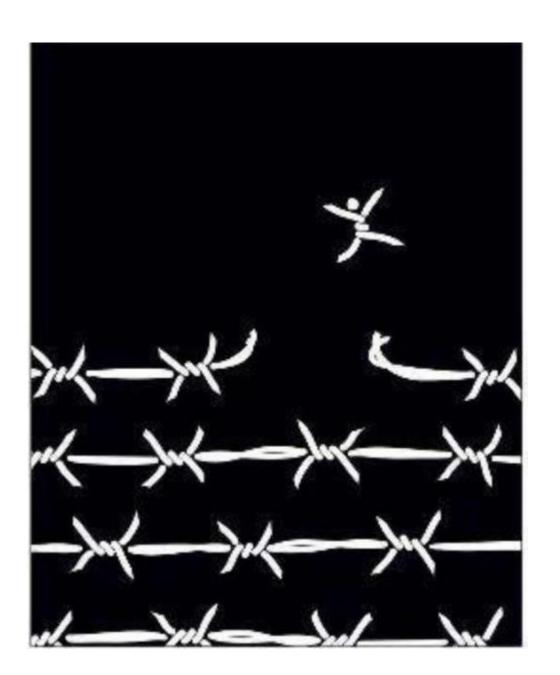
PEER RECOVERY COACHING- Non-clinical, peer-based activities that engage, educate and support an individual or family member to make life changes necessary to recover from addiction. A key element contributing to the value of this service is that peer recovery coaches appropriately highlight their personal experience of lived experience of recovery.



MEDICATION ASSISTED RECOVERY SUPPORT - Peerbased recovery support groups, recovery coaching, training, education and advocacy activities designed for the unique recovery needs of individuals in medication assisted treatment.

www.facesandvoicesofrecovery.org





RESOURCES

Wyoming Prescription Abuse Stakeholders – WRxAS https://www.wyrxabusestakeholders.com

Pocket Guide: Tapering off Opioids

https://www.cdc.gov/drugoverdose/pdf/Clinical Pocket Guide Tapering-a.pdf

CDC Guideline for Prescribing Opioids for Chronic Pain https://www.cdc.gov/media/releases/2019/s0424-advises-misapplication-guideline-prescribing-opioids.html

Medication-Assisted Therapies — Tackling the Opioid-Overdose Epidemic https://www.nejm.org/doi/full/10.1056/NEJMp1402780

Substance Abuse and Mental Health Services Administration https://www.samhsa.gov

Telling The Story of Opioids in Wyoming, 2017, Wyoming Statistical & Analysis Center https://wysac.uwyo.edu/wysac/reports/View/6665

RESOURCES

Faces and Voices of Recovery - https://facesandvoicesofrecovery.org/welcome.html

Facing It Together - https://www.wefaceittogether.org

National Council on Addiction and Drug Dependence - https://www.ncadd.org

Facing Addiction - https://www.facingaddiction.org